Reflective journal



Transformative Reflection Journal

Name

Professor

Institution

Course

Date



As I conclude my Capstone course, there are various BSN program outcomes that I feel very confident in. One of them is in respect to my skills in utilizing patient care based technologies as well as information systems besides clinical based support tools in the promotion of secure nursing practice and attaining enhanced patient outcomes. For instance, I am now capable of utilizing electronic health records (EHRs) in the storing of patients' information and data. These EHRs entail patient-centered records that are capable of providing patient's data in real time and secure manner (Kruse et. al, 2018). They are also not highly error prone like the manual records previously used and they enhance interoperability, hence capable of enhancing patient's outcomes (Kruse et. al, 2018). I am specifically more competent in the use of Web-based or cloud-based EHRS implying that they do not necessitate an internal server and the only thing one requires is to have internet connectivity. EHRs besides storing the patient's data, also support decision-making (Kruse et. al, 2018). I also feel confident in the competence of development of strategies to aid in the promotion of health as well as diseases prevention amongst individuals across their lifespan. For example, I am now more aware that health is a construct determined by one's overall mental, physical as well as social wellbeing and not just the absence of a sickness (Kumar & Preetha, 2012). In essence, I am now more aware that supportive environments, educating and empowering people to be responsible of their health and creating community-based programs is part of health promotion (Kumar & Preetha, 2012). Illustrations include advocating for at least 6 months breastfeeding for children, proper nutrition and exercises to alleviate the development of lifestyle diseases later on in life (Kumar & Preetha, 2012). As such, I am now capable of using client-centered, educational, behavioral, medical as well as societal change form of approaches in the health promotion process. The client-centered approach is concerned with working with the client to establish the areas they need to be aware of in order to make decisions based on their values (Janssen, Van Regenmortel & Abma, 2014). Educational perspective is concerned with availing persons with information in a bid to enable the proper health decisions be reached (Janssen, Van Regenmortel & Abma, 2014). Behavioral approach is aimed at transforming the patient's behavior. Societal-change form of approach focuses on changing the social or rather environmental conditions to make them suitable of promoting good health (Janssen, Van Regenmortel & Abma, 2014).

I am also confident about the utilization of evidence-based form of practice in the planning, implementation and even evaluation of care outcomes and the competence of lifelong learning as a nursing professional. This implies that I can competently use the most updated and quality scientific knowledge by synthesizing evidence to come up with the most relevant peer-reviewed evidence. Besides, as a nurse professional, I am now more aware that I should continually pursue learning



and training in order to stay abreast of recent trends, interventions and practices in care provision (Qalehsari, Khaghanizadeh & Ebadi, 2017).

I am also confident about the competence of examining trends in the realm of healthcare policy, finance, besides regulatory environments as regards their implication on accessibility, equity as well as healthcare affordability. For example, I am more than ever competent on multiculturalism or diversity in care provision (Williams, Walker & Egede, 2016). This is owing to the self-awareness that I have gained in dealing with patients and workers from diverse backgrounds. I am also more skilled on the aspect of equity in care provision, especially to marginalized areas or people such as those within rural areas (Williams, Walker & Egede, 2016). However, I find the competence on implementation of patient safety as well as quality initiatives in respect to intricate clinical microsystem utilizing leadership as well as communication skills a challenging competence. This is owing to the intricacy of the process especially in respect to offering leadership and communication during change processes. As a leader one is tasked with not only decision making, but also problem solving and the process can be intricate (Joseph & Huber, 2015).



References

Janssen, B. M., Van Regenmortel, T., & Abma, T. A. (2014). Balancing risk prevention and health promotion: towards a harmonizing approach in care for older people in the community. Health care analysis: HCA: journal of health philosophy and policy, 22(1), 82–102. https://doi.org/10.1007/s10728-011-0200-1

Joseph, M. L., & Huber, D. L. (2015). Clinical leadership development and education for nurses: prospects and opportunities. Journal of healthcare leadership, 7, 55–64. https://doi.org/10.2147/JHL.S68071

Kruse, C. S., Stein, A., Thomas, H., & Kaur, H. (2018). The use of Electronic Health Records to Support Population Health: A Systematic Review of the Literature. Journal of medical systems, 42(11), 214. https://doi.org/10.1007/s10916-018-1075-6.

Kumar, S., & Preetha, G. (2012). Health promotion: an effective tool for global health. Indian journal of community medicine: official publication of Indian Association of Preventive & Social Medicine, 37(1), 5–12. https://doi.org/10.4103/0970-0218.94009

Qalehsari, M. Q., Khaghanizadeh, M., & Ebadi, A. (2017). Lifelong learning strategies in nursing: A systematic review. Electronic physician, 9(10), 5541–5550. https://doi.org/10.19082/5541

Williams, J. S., Walker, R. J., & Egede, L. E. (2016). Achieving Equity in an Evolving Healthcare System: Opportunities and Challenges. The American journal of the medical sciences, 351(1), 33–43. https://doi.org/10.1016/j.amjms.2015.10.012

